## U. S. DEPARTMENT OF LABOR

## Employees' Compensation Appeals Board

In the Matter of JANET P. HARRISON <u>and</u> U.S. POSTAL SERVICE, POST OFFICE, New Orleans, LA

Docket No. 01-2105; Submitted on the Record; Issued April 1, 2002

**DECISION** and **ORDER** 

Before MICHAEL J. WALSH, ALEC J. KOROMILAS, WILLIE T.C. THOMAS

The issue is whether appellant has met her burden of proof to establish that her bilateral shoulder and arm conditions are causally related to factors of her federal employment, as alleged.

On June 25, 2000 appellant, then a 45-year-old distribution clerk, filed a claim for occupational disease, Form CA-2, alleging that she developed bilateral shoulder and arm tendinitis as a side effect of bilateral carpal tunnel release surgery performed in January and May 1999.<sup>1</sup> In support of her claim, appellant submitted a narrative statement describing the gradual development of bilateral shoulder and arm pain in the months following her carpal tunnel release surgeries. Appellant also submitted a report dated June 12, 2000 from her treating physician, Dr. James C. Butler, who noted appellant's complaints of shoulder pain, right worse than left, which began several months previously, after her right carpal tunnel release surgery. He further stated, in pertinent part:

"Her right shoulder symptoms are suggestive of rotator cuff tendinitis. She does not specifically cite a date that these symptoms started but claims that they were gradual in onset... At this time with her history being vague with regard to the onset of her symptoms I cannot specifically relate her complaints to any particular activity in which she is involved at her place of employment with the [employing establishment]. Further elaboration of this issue by the patient may change my opinion regarding this."

By letter dated September 11, 2000, the Office advised appellant that the information submitted was insufficient to meet her burden of proof and requested that she submit additional

<sup>&</sup>lt;sup>1</sup> The claim form contains a notation from the employing establishment indicating that appellant's claim for bilateral carpal tunnel syndrome was accepted by the Office of Workers' Compensation Programs, however, there is no independent evidence contained in the imaged record before the Board which would confirm this fact. If appellant has a prior accepted claim, then the instant claim would best be characterized as one for a consequential injury.

factual and medical information, including a comprehensive medical report from her physician.<sup>2</sup> The Office allowed 30 days for appellant to submit the requested medical and factual evidence.

By letter dated September 27, 2000, appellant responded to the Office request, describing in greater detail the onset of her shoulder and arm pain.

By decision dated November 20, 2000, the Office rejected appellant's claim on the grounds that the record contained no medical evidence causally relating her diagnosed shoulder and arm conditions to factors of her federal employment.

The Board has duly reviewed the case record in the present appeal and finds that appellant failed to establish a *prima facie* claim.

An employee seeking benefits under the Federal Employees' Compensation Act<sup>3</sup> has the burden of establishing the essential elements of his or her claim including the fact that the individual is an "employee of the United States" within the meaning of the Act, that the claim was timely filed within the applicable time limitation period of the Act, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury. These are essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease. As part of this burden, the claimant must present rationalized medical evidence, based upon a specific and accurate history. Rationalized medical evidence is evidence which relates a work incident to a claimant's condition, with stated reasons of a physician. In the instant case, appellant did not provide the required factual and medical evidence to establish a *prima facie* claim for compensation.

While appellant submitted a factual statement explaining the onset of her bilateral shoulder and arm pain following carpal tunnel release surgery, and submitted a medical report diagnosing right rotator cuff tendinitis, the record is devoid of any medical evidence relating her

<sup>&</sup>lt;sup>2</sup> The Board notes that, at the time of their September 27, 2000 letter, the Office was under the mistaken impression that appellant was requesting compensation for bilateral carpal tunnel syndrome. However, with the exception of the Office's request for the results of several tests normally associated with carpal tunnel syndrome, the Office's request that appellant provide a comprehensive medical report from her physician which describes her symptoms, results of examination and testing, diagnosis, the treatment provided, the effect of treatment, and the doctor's opinion, with medical reasons, on the cause of her condition, is applicable to any claimed medical condition. Therefore, the Office's misconception was harmless.

<sup>&</sup>lt;sup>3</sup> 5 U.S.C. §§ 8101-8193.

<sup>&</sup>lt;sup>4</sup> Elaine Pendleton, 40 ECAB 1143 (1989).

<sup>&</sup>lt;sup>5</sup> The Office's regulations clarify that a traumatic injury refers to injury caused by a specific event or incident or series of events or incidents occurring within a single workday or shift, whereas an occupational disease refers to injury produced by employment factors which occur or are present over a period longer than a single workday or shift; *see* 20 C.F.R. § 10.5(a)(15), (16).

<sup>&</sup>lt;sup>6</sup> Joseph T. Gulla, 36 ECAB 516 1985.

<sup>&</sup>lt;sup>7</sup> Debra A. Kirk-Littleton, 41 ECAB 703 (1990); Edgar L. Colley, 34 ECAB 1691, 1696 (1983).

condition to factors of her employment. Rather, Dr. Butler specifically stated that given appellant's vague history as to the onset of her symptoms, he could not specifically relate her complaints to any particular employment activity. The Board notes that even assuming that appellant does have a prior accepted claim for carpal tunnel syndrome, the medical evidence is also insufficient to establish that her bilateral arm and shoulder conditions arose as a side effect, or consequence, of her prior injuries, as Dr. Butler does not causally relate appellant's right rotator cuff tendinitis to her prior bilateral carpal tunnel syndrome or associated surgeries. The Office provided appellant with opportunities to cure the deficiencies in the claim, but at the time of the November 20, 2000 decision, she failed to submit any additional medical evidence pertaining to her claim for bilateral shoulder and arm conditions. Appellant, therefore, has failed to meet her burden of proof to establish a *prima facie* claim that she developed a medical condition either as a result of factors of her federal employment, or as a consequence of her prior bilateral carpal tunnel syndrome and associated surgeries.

The decision of the Office of Workers' Compensation Programs dated November 20, 2000 is affirmed.

Dated, Washington, DC April 1, 2002

> Michael J. Walsh Chairman

Alec J. Koromilas Member

Willie T.C. Thomas Alternate Member

<sup>8</sup> 

<sup>&</sup>lt;sup>8</sup> It is an accepted principle of workers' compensation law and the Board has so recognized, that when the primary injury is shown to have arisen out of and in the course of employment, every natural consequence that flows from the injury is deemed to arise out of the employment, unless it is the result of an independent intervening cause which is attributable to the employee's own intentional conduct. *Robert W. Meeson*, 44 ECAB 834 (1993).